

ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Jasper County HospitalCity: Rensselaer County: Jasper Year: **2004**

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	3	94	257	\$4,936
ICU Med/Surg	2	47	206	\$7,912
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	33	1,100	3,860	\$2,522
Neonatal Intermed	0	0	0	\$0
Obstetrics	5	149	304	\$4,600
Pediatric	1	87	156	NR

Psychiatric	1	584	10,379	\$1,916
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Beds	NA	100	1,029	\$4,096
Other Services	0	0	0	NA
Acute Subtotal	45	2,161	16,191	NA
Normal Newborn	7	145	289	\$1,100

II. Outpatient Visits			
Circulatory System	2,923	Digestive System	4,716
Endocrine System	3,299	Injuries and Poison	4,744
Mental Disorder	415	Musculoskeletal	5,494
Neoplasms	2,674	Nervous	2,661
Respiratory	3,518	Urinary	3,108
Other/Unknown	4,834	Total Visits	38,386
Number of Visits to Emergency Department			7,578
Percent of Emergency Department Visits of Total Visits			19.7%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
N - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
Y - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	N - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Ophthalmic Surgery	Y - Optometric Service	N - Organ Bank
N - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	N - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	Y - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
------	----------------	-------	----------------------	------	--------------